

U.S. Agency for International Development

> Bureau for Global Health

COUNTRY PROFILE

HIV/AIDS

PERU

The AIDS epidemic in Peru is mostly confined to certain higher risk populations, namely homosexual and bisexual men and commercial sex workers; however, evidence shows HIV transmission has started to spread into the general heterosexual population. In 2000, 61 percent of new HIV cases in Peru occurred in heterosexuals. Though men still account for

Estimated Number of Adults and Children Living with HIV/AIDS (end of 2001)	53,000
Total Population (2001)	26,093 million
Adult HIV Prevalence (end of 2001)	0.4%
HIV-1 Seroprevalence in Urban Areas	
Population most at risk (i.e., sex workers and clients, patients with a sexually transmitted infection, or others with known risk factors)	1.6%
Population not at risk (i.e., pregnant women, blood donors, or others with no known risk factors)	0.6%

Sources: UNAIDS, U.S. Census Bureau

the majority (82 percent) of reported AIDS cases, most of the heterosexual HIV transmission appears to be to female partners of bisexual men, or to female partners of the clients of sex workers. Therefore, an increase in the ratio of women to men who have AIDS has been observed (1:2.3 in 2001). Among both males and females, those of reproductive age (age 20–39) are most affected. Injecting drug use, blood transfusions, and perinatal transmission are insignificant forms of transmission in Peru, and, collectively, accounted for less than 4 percent of new infections in 2000.

Most reported cases of HIV have been in metropolitan Lima and Callao, though other urban areas, especially those along the coast and in the jungle, are showing a rising incidence. HIV transmission has not yet become a concern outside the major urban areas.

By the end of 2001, 53,000 people were reported living with HIV or AIDS. According to UNAIDS, 17,000 children have become orphans since the numbers began to be recorded in 1983.

NATIONAL RESPONSE

Peru's strategy to prevent sexually transmitted infections was heralded as a model for the Andean

Talara Paita Piura Yurimaguas

Chiclayo Trujillo Salaverry Chimbote Huanuco San Callao Huancayo Maldonado Puerto Cusco Ica Matarani Illo Tacha Chille

region, and in 2000 UNAIDS cited Peru's HIV/AIDS prevention program as one of the best in the world. Peru was among the first three countries in Latin America (with Bolivia and Brazil) to adopt syndromic management of sexually transmitted infections and to begin offering prophylaxis to prevent perinatal transmission.

HIV/AIDS expenditures in Peru totaled US\$96.3 million in 2000, 21 percent of which came from public sources. The Programa de Control de Enfermedades de Transmision Sexual y SIDA (PROCETSS) was the Peruvian government program to control sexually transmitted infections, including surveillance, care, and treatment for HIV. The leaders of PROCETSS were instrumental in working with the Peruvian Congress to pass Law 26626, which

1300 Pennsylvania Avenue NW Washington, DC 20523-3600

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Map of Peru: PCL Map Collection, University of Texas

protects the rights of persons living with HIV/AIDS. PROCETSS was established by the Ministry of Health in 1995, and in 2001, when the Ministry of Health was reorganized, the activities under this program were re-allocated to a technical team in the Ministry of Health.

Peru's goal is to limit further expansion of the epidemic by preventing new cases and to limit transmission from at-risk individuals to the general population. The country's strategy was defined by Peru's Vice Minister of Health during an address at the United Nations Special Session on HIV/AIDS in June 2001. Peru's national response has the following objectives:

- Decrease sexual transmission;
- Further decrease blood-borne transmission;
- Decrease vertical transmission;
- Decrease economic and social impact on people living with HIV/AIDS; and
- Strengthen intrasector and intersector coordination for the control of HIV and sexually transmitted infections.

USAID SUPPORT

Activities sponsored by the U.S. Agency for International Development (USAID) to stem the spread of HIV and provide care for infected individuals are carried out as part of a larger initiative to improve the health of all Peruvians. In 2003, financing for all health-related projects funded by USAID will total nearly \$23 million.

The USAID program, "Improved Health for Peruvians," includes technical and training assistance to:

- Improve the quality, accessibility, and use of basic health services;
- Encourage Peruvians to practice healthy behaviors; and
- Develop policies and programs that are more responsive to health needs.

USAID works closely with several directorates within the Ministry of Health to curb transmission of sexually transmitted infections, reduce mother-to-child transmission, ensure safety of the blood supply, provide care and support to those affected by HIV/AIDS, and strengthen intersectoral coordination for HIV/AIDS.

HIV prevention through behavior change communication, information, and education

Health education activities are being developed with USAID funds for use in public schools to teach children and young people about healthy behaviors that prevent infectious diseases, such as HIV/AIDS, tuberculosis, and malaria, and to promote healthy families. Furthermore, USAID education and outreach efforts, including innovative radio programs aimed at women of reproductive age, address the continuing challenges of preventing early and unwanted pregnancy, eliminating or reducing the incidence of sexually transmitted infections, reducing maternal mortality, and increasing the involvement of men in reproductive health care.

Capacity building

USAID provides assistance to universities that train health professionals to develop and implement strategic plans, programs, and better teaching methodologies and materials, with the goal of reducing maternal and neonatal mortality and infectious disease transmission, including HIV, and studying the relationship between tuberculosis and HIV/AIDS. Technical assistance is provided to set standards, modernize curricula, and create institutional mechanisms for accreditation of health professional training institutions.

USAID also supports economic studies and analyses of key health policies, health financing, and management functions to assist Peruvian officials to define and implement broad health sector reforms and improvements. As part of this, several health facilities have received physical upgrades and medical equipment to meet the requirements of accreditation. Human resources and management information systems within the Ministry of Health will be strengthened at local levels as part of the government's decentralization program.

Finally, strengthening civil society through advocacy activities aims to increase clients' awareness of quality reproductive health services, create channels for family planning clients to better control the services they receive, and support moni-

toring of compliance with U.S. and Peruvian standards of care and respect for human rights, especially for people living with HIV/AIDS.

Condom use

Efforts are being made with USAID assistance to expand the sources of condoms and other family planning services available to Peruvian families though commercial providers. The existing contraceptive logistics system will be expanded to support the distribution of other medical commodities to clients as well.

Surveillance

USAID works to strengthen Peru's national epidemiological surveillance system, which tracks sexually transmitted infections, including HIV, particularly within at-risk populations. Mission activities include improving laboratory diagnostic capabilities; supporting the study of the relationship between tuberculosis and HIV/AIDS; disseminating information, education, and communication materials; and training peer health educators.

Important Links and Contacts

National AIDS Program

Programa Nacional de Control de SIDA y ETS Ministerio de Salud, Av. Salaverry s/n, Jesús Mariá, Lima, Perú Tel: (51-1) 433-2761, Fax: (51-1) 433-2761

USAID/Peru

Av. Arequipa 351 Lima 1, Perú Tel: (51-1) 433-3200

Fax: (51-1) 433-3200

Website: <u>usembassy.state.gov/lima/wwwhmain.html</u> USAID/Peru web site: <u>http://www.usaid.gov/pe/</u>

USAID HIV/AIDS web site for Peru: http://www.usaid.gov/pop_health/aids/Countries/lac/peru.html

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For more information, see www.usaid.gov/pop/aids or www.synergvaids.com.

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